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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

2009

Open to Public
InspectionUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2009 calendar year, or tax year beginning and ending

<input type="checkbox"/> Check if applicable. <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ILLOWA COUNCIL, INC. BOY SCOUTS OF AMERICA		D Employer identification number 36-2616917	
	Doing Business As			
	Number and street (or P O box if mail is not delivered to street address) 4412 N. BRADY STREET			Room/suite
	City or town, state or country, and ZIP + 4 DAVENPORT, IA 52806			
	F Name and address of principal officer: THOMAS P MCDERMOTT SAME AS C ABOVE			
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ► WWW.ILLOWABSA.ORG			E Telephone number 563-388-7233	
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►			L Year of formation: 1965 M State of legal domicile: IL	

Part I Summary

Activities & Governance 2009 SEP	1 Briefly describe the organization's mission or most significant activities: PROVIDING AN EDUCATIONAL PROGRAM FOR BOYS & YOUNG ADULTS TO BUILD CHARACTER, TO TRAIN IN THE	
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3 Number of voting members of the governing body (Part VI, line 1a) 3 50	
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 48	
	5 Total number of employees (Part V, line 2a) 5 53	
	6 Total number of volunteers (estimate if necessary) 6 2568	
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a 0.	
	b Net unrelated business taxable income from Form 990-T, line 34 7b 0.	
	8 Contributions and grants (Part VIII, line 1h) 1,485,718. Current Year 1,280,950.	
	9 Program service revenue (Part VIII, line 2g) 392,480. 407,403.	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -50,701. -288,150.		
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 161,683. 75,962.		
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,989,180. 1,476,165.		
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 10,055. 9,935.		
14 Benefits paid to or for members (Part IX, column (A), line 4) 1,079,048. 1,045,187.		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 14,367. 16,214.		
16a Professional fundraising fees (Part IX, column (A), line 11e) 215,120.		
b Total fundraising expenses (Part IX, column (D), line 25) 215,120.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 765,735. 799,620.		
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 1,869,205. 1,870,956.		
19 Revenue less expenses. Subtract line 18 from line 12 119,975. -394,791.		
20 Total assets (Part X, line 16) 4,207,215. Beginning of Current Year 4,516,323.		
21 Total liabilities (Part X, line 26) 692,540. End of Year 828,966.		
22 Net assets or fund balances. Subtract line 21 from line 20 3,514,675. 3,687,357.		

Net Assets or
Fund Balances

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign
Here

Signature of officer

RECEIVED

AUG 30 2010

1086 OSC

8-16-10

Date

THOMAS P MCDERMOTT, SECRETARY/SCOUT EXECUTIVE

Type or print name and title

Paid
Preparer's
Use Only

Preparer's signature ► Frank Doyle, CPA	Date 08/12/10	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 DOYLE & KEENAN, P.C. 908 W 35TH ST DAVENPORT, IA 52806-5826	EIN ►	Phone no ► (563) 386-2727	

May the IRS discuss this return with the preparer shown above? (see instructions)

X Yes No

10/16

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

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Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
**THE ILLOWA COUNCIL OPERATES IN DAVENPORT, IOWA, AND GIVES SERVICE TO
 YOUNG BOYS AND MEN AGES 7-21, AND YOUNG WOMEN AGES 14-21 IN 13
 COUNTIES OF IOWA AND ILLINOIS. THE ILLOWA COUNCIL INC., BOY SCOUTS OF
 AMERICA IS A NOT-FOR-PROFIT ORGANIZATION DEVOTED TO PROMOTING, WITHIN**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
 If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
 If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 448,429. including grants of \$) (Revenue \$ 283,679.)
**PROVIDING CAMPGROUNDS AND RECREATIONAL ACTIVITIES TO CAMPERS AND THEIR
 FAMILIES. CAMPERS SERVED 2,991.**

4b (Code:) (Expenses \$ 1,127,859. including grants of \$) (Revenue \$ 123,724.)
**SUPPORT FOR ACTIVITIES AND EDUCATIONAL EXPERIENCES DESIGNED TO BUILD
 CHARACTER, CITIZENSHIP AND PERSONAL FITNESS. SCOUTS SERVED 6,950.**

4c (Code:) (Expenses \$) including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)
 (Expenses \$) including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 1,576,288.

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932002
02-04-10

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Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
If "Yes," complete Schedule A
- 2 Is the organization required to complete Schedule B, Schedule of Contributors?
- 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- 4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 5 **Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III
- 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV
- 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?
If "Yes," complete Schedule D, Part V
- 11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable
 - Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
 - Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII
 - Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 18? If "Yes," complete Schedule D, Part VIII
 - Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX
 - Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.
 - Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.
- 12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII
- 12A Was the organization included in consolidated, independent audited financial statements for the tax year?
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
 - b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I
- 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II
- 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III
- 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I
- 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
- 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III
- 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

	Yes	No
1	X	
2	X	
3		X
4		X
5		
6		X
7		X
8		X
9		X
10	X	
11	X	
12	X	
12A	X	
13		X
14a		X
14b		X
15		X
16		X
17	X	
18	X	
19		X
20		X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38	X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a		6	
1b		0	
1c	X		
2a		53	
2b	X		
3a		X	
3b			
4a	X		
5a		X	
5b		X	
5c			
6a		X	
6b			
7a		X	
7b			
7c		X	
7d			
7e			
7f			
7g			
7h			
8			
9a			
9b			
10a			
10b			
11a			
11b			
12a			
12b			

1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable

1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable

1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return

2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)

3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?

b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

b If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?

6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

7 **Organizations that may receive deductible contributions under section 170(c).**

a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?

b If "Yes," did the organization notify the donor of the value of the goods or services provided?

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?

d If "Yes," indicate the number of Forms 8282 filed during the year

e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?

h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?

8 **Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

9 **Sponsoring organizations maintaining donor advised funds.**

a Did the organization make any taxable distributions under section 4966?

b Did the organization make a distribution to a donor, donor advisor, or related person?

10 **Section 501(c)(7) organizations.** Enter:

a Initiation fees and capital contributions included on Part VIII, line 12

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

11 **Section 501(c)(12) organizations.** Enter:

a Gross income from members or shareholders

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)

12a **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body
1a 50
1b 48

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?
2 X

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?
3 X

4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?
4 X

5 Did the organization become aware during the year of a material diversion of the organization's assets?
5 X

6 Does the organization have members or stockholders?
6 X

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?
7a X

b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?
7b X

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
8a X
8b X

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O
9 X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Does the organization have local chapters, branches, or affiliates?
10a X

b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?
10b

11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?
11 X

11a Describe in Schedule O the process, if any, used by the organization to review this Form 990.
12a X

12a Does the organization have a written conflict of interest policy? If "No," go to line 13
12b X

b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
12c X

c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done
13 X

13 Does the organization have a written whistleblower policy?
14 X

14 Does the organization have a written document retention and destruction policy?
15 X

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?
15a X
15b X

a The organization's CEO, Executive Director, or top management official
16a X

b Other officers or key employees of the organization
If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)
16b

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?
16b

b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **IL**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► **THOMAS P MCDERMOTT - (563) 388-7233**
4412 N BRADY STREET, DAVENPORT, IA 52806

Form 990 (2009)

932006
02-04-10

Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter **0** in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees. See page 10 for a list of key employees.

- List all of the organization's **current** key employees. See instructions for definition of "key employee".
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization,

more than \$10,000 of reportable compensation from the organization and any related organizations.
List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees;

Check this box if the organization did not compensate any current officer, director, or trustee.

Check this box if the organization did not compensate any current officer, director, or trustee.

Name and Title _____ Average _____ Position _____ Report _____

ILLOWA COUNCIL, INC. BOY SCOUTS OF
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

1b Total ► 103,050. 0. 25,670.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization **NONE**

the organization	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►	0	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 0

1

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

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Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts					
1 a Federated campaigns	1a	224,062.			
b Membership dues	1b				
c Fundraising events	1c	394,184.			
d Related organizations	1d				
e Government grants (contributions)	1e				
f All other contributions, gifts, grants, and similar amounts not included above	1f	662,704.			
g Noncash contributions included in lines 1a-1f \$					
h Total. Add lines 1a-1f		► 1,280,950.			
Program Service Revenue		Business Code			
2 a ESTABLISHED CAMPS		900099	283,679.	283,679.	
b MISC ACTIVITY FEES		900099	123,724.	123,724.	
c					
d					
e					
f All other program service revenue					
g Total. Add lines 2a-2f		► 407,403.			
3 Investment income (including dividends, interest, and other similar amounts)			► 40,706.		40,706.
4 Income from investment of tax-exempt bond proceeds			►		
5 Royalties			►		
6 a Gross Rents	(i) Real	(ii) Personal			
b Less: rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)		►			
7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less: cost or other basis and sales expenses	1288591.				
c Gain or (loss)	1617320.	127.			
d Net gain or (loss)	-328729.	-127.			
		►	-328,856.	-328,856.	
8 a Gross income from fundraising events (not including \$ 394,184. of contributions reported on line 1c). See Part IV, line 18	a	483,869.			
b Less: direct expenses	b	407,907.			
c Net income or (loss) from fundraising events		►	75,962.	75,962.	
9 a Gross income from gaming activities. See Part IV, line 19	a				
b Less: direct expenses	b				
c Net income or (loss) from gaming activities		►			
10 a Gross sales of inventory, less returns and allowances	a				
b Less: cost of goods sold	b				
c Net income or (loss) from sales of inventory		►			
Miscellaneous Revenue	Business Code				
11 a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d		►			
12 Total revenue. See instructions		► 1,476,165.	154,509.	0.	40,706.

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

Form 990 (2009)

36-2616917 Page 10

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	9,935.	9,935.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	128,720.	106,033.	5,274.	17,413.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	730,511.	593,597.	29,538.	107,376.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	113,462.	92,389.	4,944.	16,129.
10 Payroll taxes	72,494.	59,957.	2,777.	9,760.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17	16,950.		16,950.	
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	137,469.	127,102.	4,320.	6,047.
17 Travel	74,112.	66,101.	2,840.	5,171.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	29,036.	27,668.	570.	798.
20 Interest	25,196.	23,225.	821.	1,150.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	128,117.	126,101.	840.	1,176.
23 Insurance	30,451.	26,489.	745.	3,217.
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a SUPPLIES	141,846.	138,928.	285.	2,633.
b RECOGNITION AWARDS	35,799.	27,447.	98.	8,254.
c PRINTING AND PUBLICATIO	28,310.	20,238.	541.	7,531.
d RENTAL AND MAINTENANCE	27,342.	25,784.	649.	909.
e CHARTER FEES AND QUOTA	25,215.	22,189.	1,261.	1,765.
f All other expenses	99,777.	83,105.	7,095.	9,577.
25 Total functional expenses. Add lines 1 through 24f	1,870,956.	1,576,288.	79,548.	215,120.
26 Joint costs. Check here ► <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

Form 990 (2009)

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Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	158,107.	1	252,464.
	2 Savings and temporary cash investments	298,739.	2	160,705.
	3 Pledges and grants receivable, net	201,867.	3	156,961.
	4 Accounts receivable, net	74,447.	4	56,756.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	79,765.	8	3,363.
	9 Prepaid expenses and deferred charges	24,843.	9	152,326.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,613,357.		
	b Less: accumulated depreciation	10b 1,810,288.	10c 1,958,583.	10c 2,803,069.
	11 Investments - publicly traded securities	1,024,854.	11	682,729.
	12 Investments - other securities. See Part IV, line 11	386,010.	12	247,950.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	4,207,215.	16	4,516,323.
Liabilities	17 Accounts payable and accrued expenses	236,487.	17	182,536.
	18 Grants payable		18	
	19 Deferred revenue	135,797.	19	331,174.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	320,256.	23	315,256.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	692,540.	26	828,966.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,716,278.	27	3,049,206.
	28 Temporarily restricted net assets	565,578.	28	383,193.
	29 Permanently restricted net assets	232,819.	29	254,958.
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	3,514,675.	33	3,687,357.
	34 Total liabilities and net assets/fund balances	4,207,215.	34	4,516,323.

Form 990 (2009)

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

Form 990 (2009)

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Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?
b Were the organization's financial statements audited by an independent accountant?
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization **ILLOWA COUNCIL, INC. BOY SCOUTS OF AMERICA** Employer identification number **36-2616917**

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
 e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
 f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
 h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your support?	(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of support
					Yes	No	
Total							

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

ILLOWA COUNCIL, INC. BOY SCOUTS OF

Schedule A (Form 990 or 990-EZ) 2009 AMERICA

36-2616917 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	779,477.	808,608.	807,956.	1485718.	1019019.	4900778.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	779,477.	808,608.	807,956.	1485718.	1019019.	4900778.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						4900778.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	779,477.	808,608.	807,956.	1485718.	1019019.	4900778.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	65,607.	95,362.	149,180.	126,685.	40,706.	477,540.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						5378318.
12 Gross receipts from related activities, etc (see instructions)					12	4,238,090.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	91.12	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	90.95	%
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			► <input checked="" type="checkbox"/>
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			► <input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			► <input type="checkbox"/>
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			► <input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			► <input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2009

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ►

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Schedule D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2009Open to Public
InspectionName of the organization **ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA** Employer identification number **36-2616917****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
2a	
2b	
2c	
2d	

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____
(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____
b Assets included in Form 990, Part X ► \$ _____

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

Schedule D (Form 990) 2009

36-2616917 Page 3

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
US TREASURY SECURITIES,		
MUNICIPAL BONDS, CORPORATE		
NOTES	242,533.	END-OF-YEAR MARKET VALUE
COMMUNITY FOUNDATION	5,417.	END-OF-YEAR MARKET VALUE
Total (Col (b) must equal Form 990, Part X, col (B) line 12) ►	247,950.	

Total. (Col (b) must equal Form 990, Part X, col (B) line 12) ► 247,950.

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

Total. (Col (b) must equal Form 990, Part X, col (B) line 13) ►

Part IX **Other Assets.** See Form 990, Part X, line 15.

Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)

Part X **Other Liabilities.** See Form 990, Part X, line 25.

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

932053
02-01-10

Schedule D (Form 990) 2009

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

Schedule D (Form 990) 2009

36-2616917 Page 4

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,476,165.
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	1,870,956.
3 Excess or (deficit) for the year. Subtract line 2 from line 1	3	-394,791.
4 Net unrealized gains (losses) on investments	4	566,572.
5 Donated services and use of facilities	5	
6 Investment expenses	6	
7 Prior period adjustments	7	
8 Other (Describe in Part XIV.)	8	901.
9 Total adjustments (net). Add lines 4 through 8	9	567,473.
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	172,682.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1 Total revenue, gains, and other support per audited financial statements	1	2,483,853.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	2a	566,572.
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV.)	2d	465,779.
e Add lines 2a through 2d	2e	1,032,351.
3 Subtract line 2e from line 1	3	1,451,502.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV.)	4b	24,663.
c Add lines 4a and 4b	4c	24,663.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,476,165.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1 Total expenses and losses per audited financial statements	1	1,846,293.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIV.)	2d	
e Add lines 2a through 2d	2e	0.
3 Subtract line 2e from line 1	3	1,846,293.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV.)	4b	24,663.
c Add lines 4a and 4b	4c	24,663.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,870,956.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

PART V, LINE 4: THE ENDOWMENT FUND IS A VEHICLE TO SUPPORT AND ENHANCE

THE ILLOWA COUNCIL, INC. BOY SCOUTS OF AMERICA'S MISSION. THE ENDOWMENT FUND ATTRACTS CURRENT GIVING THROUGH CASH, AS WELL AS PLANNED AND FUTURE GIFTS, AS PEOPLE DESIRE TO LEAVE A LEGACY FOR THE BOYSCOUTS...GIFTS THAT NURTURE CITIZENSHIP AND CHARACTER DEVELOPMENT.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

CHANGE IN INVESTMENT INCOME: 901.

932054
02-01-10

Schedule D (Form 990) 2009

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

Schedule D (Form 990) 2009

36-2616917 Page 5

Part XIV Supplemental Information (continued)

PART XII, LINE 2D - OTHER ADJUSTMENTS:

NET ASSETS RELEASED FROM RESTRICTION: 464878.

CHANGE IN INVESTMENT INCOME: 901.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

TRADING POST GOODS: 20180.

ADMIN FEES-AGENCY ACCT: 4483.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

TRADING POST GOODS: 20180.

ADMIN FEES-AGENCY ACCT: 4483.

Department of the Treasury
Internal Revenue Service

- Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
 - Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization **ILLOWA COUNCIL, INC. BOY SCOUTS OF AMERICA** Employer identification number **36-2616917**

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
BRAREN, MULDER, GERMAN ASSOCIATES, INC	CONSULTS & DIRECTS IN GUIDING A CAPI	Yes X	No	82,840.	16,214.

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

36-2616917 Page 2

Schedule G (Form 990 or 990-EZ) 2009

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

	(a) Event #1 GOLF OUTINGS	(b) Event #2 CLAY SHOOT	(c) Other events 1	(d) Total events (add col. (a) through col. (c))
Revenue	(event type)	(event type)	(total number)	
1 Gross receipts	46,976.	79,212.	751,865.	878,053.
2 Less: Charitable contributions			394,184.	394,184.
3 Gross income (line 1 minus line 2)	46,976.	79,212.	357,681.	483,869.
Direct Expenses				
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs				
7 Food and beverages	0.			
8 Entertainment				
9 Other direct expenses	19,280.	30,945.	357,682.	407,907.
10 Direct expense summary. Add lines 4 through 9 in column (d)				► (407,907,
11 Net income summary. Combine line 3, column (d), and line 10				► 75,962.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				
1 Gross revenue				
Direct Expenses				
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No _____ %	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No _____ %	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No _____ %	
7 Direct expense summary. Add lines 2 through 5 in column (d)				► ()
8 Net gaming income summary. Combine line 1, column (d), and line 7				►

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," explain:

	Yes	No
9a		
10a		
11		
12		

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain:

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

Schedule G (Form 990 or 990-EZ) 2009

36-2616917 Page 3

13 Indicate the percentage of gaming activity operated in:

- a The organization's facility
- b An outside facility

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.

c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

Director/officer

Employee

Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

17a

Schedule G (Form 990 or 990-EZ) 2009

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

Schedule I (Form 990) 2009

36-2616917 Page 2

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
CAMPERSHIPS	111	0.	6,457. FMV	CAMP SCHOLARSHIP BASED ON NEED.	
LEARNING FOR LIFE PROGRAM	406	0.	2,500. FMV	AN AFTER SCHOOL PROGRAM AIMED AT "AT RISK" YOUTH IN LOW INCOME AREAS WITH THE FOCUS ON CHARACTER DEVELOPMENT.	
SCOUT REACH UNITS	252	0.	978. FMV	A TRADITIONAL UNIT PROGRAM AIMED AT "AT RISK" YOUTH IN LOW INCOME AREAS WITH THE FOCUS ON CHARACTER	

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: THE ORGANIZATION HAS CURRENTLY IN PLACE A

CENTRALIZED INFORMATION SYSTEM FOR MULTIPLE PROGRAMS AND USES THE

INFORMATION TO TRACK GRANT/DONATION STATUS. NO FUNDS PROVIDED FOR BOYS AND GIRLS PROGRAMMING MAY BE EXPENDED FOR CHARACTER DEVELOPMENT, CITIZENSHIP TRAINING, ETC., UNTIL THE SCOUT DIRECTOR REVIEWS AND AUTHORIZES THE FUNDS REQUEST FORM SUBMITTED BY PROFESSIONAL STAFF.

(F) DESCRIPTION OF NON-CASH ASSISTANCE: A TRADITIONAL UNIT PROGRAM AIMED

28

Schedule I (Form 990) 2009

Part IV Supplemental Information

AT "AT RISK" YOUTH IN LOW INCOME AREAS WITH THE FOCUS ON CHARACTER DEVELOPMENT.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
► Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

Employer identification number
36-2616917

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RESPONSIBILITIES OF PARTICIPATING CITIZENSHIP, AND TO DEVELOP PERSONAL
FITNESS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE TERRITORY-COVERED BY THE CHARTER FROM TIME TO TIME GRANTED IT BY
THE BOY SCOUTS OF AMERICA AND IN ACCORDANCE WITH THE CONGRESSIONAL
PROGRAM OF PROMOTING THE ABILITY OF BOYS AND YOUNG MEN AND WOMEN TO DO
THINGS FOR THEMSELVES AND OTHERS, TRAINING THEM IN SCOUT-CRAFT AND
TEACHING THEM PATRIOTISM, COURAGE, SELF-RELIANCE, AND TO PREPARE THEM
TO MAKE ETHICAL CHOICES OVER THEIR LIFETIME AND ACHIEVE THEIR FULL
POTENTIAL USING THE METHODS WHICH ARE NOW IN COMMON USE BY THE BOY
SCOUTS OF AMERICA.

FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE FORM 990 WAS PROVIDED
TO THE ORGANIZATION'S GOVERNING BODY BEFORE IT WAS SIGNED AND FILED BY THE
SECRETARY. THERE IS ALSO, A VIGOROUS FORMAL REVIEW OF THE AUDIT REPORT THAT
IS ACCOMPLISHED IN THREE STAGES. THE INITIAL REVIEW IS PERFORMED AND
APPROVED BY THE AUDIT COMMITTEE WHOSE FINDINGS AND APPROVAL ARE
SUBSEQUENTLY PRESENTED TO THE EXECUTIVE COMMITTEE AS A WHOLE. THE FINAL
APPROVAL OF THE AUDIT REPORT RESTS WITH BOARD MEMBERS PRESENT. FINANCIAL
INFORMATION USED IN THE PREPARATION OF THE FORM 990 COMES DIRECTLY FROM THE
FINAL AUDIT REPORT AND ITS DISCLOSURES.

FORM 990, PART VI, SECTION B, LINE 12C: EACH YEAR THE BOARD MEMBERS AND
ALL EMPLOYEES SIGN A CONFLICT OF INTEREST AGREEMENT AND COPIES ARE RETAINED

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
932211
02-03-10

Schedule O (Form 990) 2009

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
► Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization **ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA** Employer identification number **36-2616917**

BY THE REGIONAL OFFICE. THE BOARD MEMBERS AND ALL EMPLOYEES WITHIN THE
ORGANIZATION'S MANAGEMENT STRUCTURE WILL NOT ENDEAVOR IN ANY CONFLICTING
BUSINESS PRACTICES THAT MAY PERTAIN TO ANY SUCH INDIVIDUALS BENEFITTING
FROM SUCH ACTIONS. ANY SUCH BUSINESS AGREEMENTS OR CONTRACTS WILL BE
REVIEWED AS NECESSARY TO ASSURE THAT THEY FALL WITHIN POLICY GUIDELINES
WHILE SAFEKEEPING THE ORGANIZATION'S FINANCIAL INTERESTS.

FORM 990, PART VI, SECTION B, LINE 15: EACH YEAR THE COMPENSATION
COMMITTEE MEETS TO DISCUSS GOALS AND DETERMINE THE DESIRED COMPENSATION
PACKAGE FOR EACH OF THEIR KEY EMPLOYEES. THE ORGANIZATION UTILIZES THE
SALARY AND BENEFITS GUIDELINES SET BY NATIONAL TO ARRIVE AT AN APPROPRIATE
SALARY AND BENEFIT PLAN FOR THEIR SCOUT EXECUTIVES, COMMISSIONED
PROFESSIONALS AND CERTIFIED LEARNING FOR LIFE EXECUTIVES. THE EXECUTIVE
COMMITTEE APPROVES THE KEY EMPLOYEES' COMPENSATION EACH DECEMBER, AND THE
BOARD APPROVES THE BUDGET FOR THE OPERATIONS WHICH INCLUDES SALARIES OF KEY
EMPLOYEES AND DEPARTMENT HEADS.

FORM 990, PART VI, SECTION C, LINE 19: IT IS AT THIS LOCATION, 4412 N.
BRADY STREET, DAVENPORT, IA 52806, THAT THE ORGANIZATION'S GOVERNING
DOCUMENTS, FINANCIAL STATEMENTS AND SIGNED COPIES OF TAX RETURNS ARE KEPT
AND MADE AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST.

FORM 990. PART XI, LINE 2C
AUDIT COMMITTEE
THE AUDIT COMMITTEE ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE
AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
932211
02-03-10

Schedule O (Form 990) 2009

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
► Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

ILLOWA COUNCIL, INC. BOY SCOUTS OF
AMERICA

Employer identification number
36-2616917

ACCOUNTANT.

THE BOARD OF DIRECTORS GIVE FINAL APPROVAL OF THE AUDITED FINANCIAL
STATEMENTS.

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: GREG LARRISON

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

PARTNER IN LARRISON & ASSOC. & SITS AS AN EXECUTIVE COMMITTEE BOARD MEMBER.

(D) DESCRIPTION OF TRANSACTION: ARCHITECTURAL FEES

PART I, SUMMARY LINE 6

VOLUNTEERISM

VOLUNTEERS IN THE BOY SCOUTS OF AMERICA PROVIDE A WIDE VARIETY OF
SUPPORT AND PROGRAMMING TO DELIVER CHARACTER DEVELOPMENT, CITIZENSHIP
TRAINING, PHYSICAL FITNESS, SKILL DEVELOPMENT, VOCATIONAL TRAINING, AND
LEADERSHIP DEVELOPMENT TO BOYS AND GIRLS AGES 6 TO 20 IN OUR LEARNING
FOR LIFE, EXPLORING, CUB SCOUTING, BOY SCOUTING, AND VENTURING
PROGRAMS. VOLUNTEERS SERVE IN A MULTITUDE OF POSITIONS IN THE AREAS OF
FRONTLINE PROGRAM DELIVERY, ACTIVITIES AND CIVIC SERVICE, MEMBERSHIP
RECRUITMENT, FUNDRAISING, YOUTH AND ADULT LEADER TRAINING, UNIT
SUPPORT, AND GOVERNANCE.

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations taxable as corporations or trusts during the tax year)

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
- b Gift, grant, or capital contribution to other organization(s)
- c Gift, grant, or capital contribution from other organization(s)
- d Loans or loan guarantees to or for other organization(s)
- e Loans or loan guarantees by other organization(s)
- f Sale of assets to other organization(s)
- g Purchase of assets from other organization(s)
- h Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)
- k Performance of services or membership or fundraising solicitations for other organization(s)
- l Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets
- n Sharing of paid employees
- o Reimbursement paid to other organization for expenses
- p Reimbursement paid by other organization for expenses
- q Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(1) ILLIWA COUNCIL INC BOY SCOUTS TR 23070200-ENDOWMENT FUNDS

(2) ILLIWA COUNCIL INC BOY SCOUTS TR 23070200-INVESTMENT EARNINGS

(3) _____

(4) _____

(5) _____

(6) _____

(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
	E	824,176.
	A	50,000.

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Schedule R (Form 990) 2009

Illowa Council, Boy Scouts of America

2009 Executive Board

36-2616917

Last Name	First Name	City, State, Zip	Board Position	Executive Committee Position
Bahls	Steven	Rock Island IL 61201	Executive Committee	Mbr-at-Large
Bauer	Mike	Davenport IA 52806	Executive Committee	Mbr-at-Large
Behrens	Roger	Muscatine IA 52761	Executive Committee	Mbr-at-Large
Bruhn	Chuck	Silvis IL 61282	Executive Committee	VP Learning for Life
Cropper	Douglas	Davenport IA 52803	Executive Committee	Mbr-at-Large
Greer	Jerry	East Moline IL 61244	Executive Committee	VP - Properties
McDermott	Thomas	Davenport IA 52806	Executive Committee	Secretary
Moon	Will	Walcott IA 52773	Executive Committee	Treasurer
Oppel	Curt	Davenport IA 52801	Executive Committee	Legal Counsel
Pohlmann	Pete	Davenport IA 52806	Executive Committee	President
Richardson	Jim	Davenport IA 52801	Executive Committee	VP Development
Riches	John	Bettendorf IA 52722	Executive Committee	VP Membership
Stafford	Hugh	Bettendorf IA 52722	Executive Committee	VP Endowment
Tarnow	Matt	Bettendorf IA 52722	Executive Committee	VP Program
Almanza	Julio	Blue Grass IA 52726	Executive Board	
Bawden	Mike	Davenport IA 52801	Executive Board	
Boostrom	Roger	East Moline IL 61244	Executive Board	
Cameron	Duncan	Davenport IA 52806	Executive Board	
Chapman	Brice	Muscatine IA 52761	Executive Board	
DePuydt	Dan	Bettendorf IA 52722	Executive Board	
Evans	Dave	Moline IL 61265	Executive Board	
Francois	Gary	Galesburg IL 61401	Executive Board	
Freeman	Gary	Moline IL 61265	Executive Board	
Getz	Tom	Moline IL 61265	Executive Board	
Green	David	Davenport IA 52807	Executive Board	
Greer	Larry	East Moline IL 61244	Executive Board	
Hittle	Dennis	Davenport IA 52807	Executive Board	
John	Rick	Moline IL 61265	Executive Board	
Johnson	Donald	Rock Island IL 61204	Executive Board	
Johnson	Jay	Davenport IA 52806	Executive Board	
Korrect	Steve	Waterloo IA	Executive Board	
Lande	Roger	Muscatine IA 52761	Executive Board	

36-2616917

Last Name	First Name	City, State, Zip	Board Position	Executive Committee Position
Larrison	Greg	Davenport IA 52804	Executive Board	
Lee	Bob	Bettendorf IA 52722	Executive Board	
Martin	Ken	Rock Island IL 61201	Executive Board	
Meyer	Christian	Davenport IA 52803	Executive Board	
Nepple	James	Muscatine IA 52761	Executive Board	
Northup	Bill	Davenport IA 52801	Executive Board	
Patton	James	Moline IL 61265	Executive Board	
Ploehn	Decker	Bettendorf IA 52722	Executive Board	
Roderick	Bill	Rock Island IL 61201	Executive Board	
Romkey	Mike	Moline IL 61265	Executive Board	
Scovil	Doug	Rock Island IL 61201	Executive Board	
Seligman	Morris	Rock Island IL 61201	Executive Board	
Singh	Ajay	Davenport IA 52807	Executive Board	
Travis	Bob	Davenport IA 52803	Executive Board	
Van Raalte	Benjamin	Davenport IA 52807	Executive Board	
Watson	Jim	Moline IL 61265	Executive Board	
White	John	Davenport IA 52808	Executive Board	
Willis	Tracy	Davenport IA 52806	Executive Board	

Application for Extension of Time To File an
Exempt Organization Return

Mailed 5/6

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

► **Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

►

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization ILLOWA COUNCIL, INC. BOY SCOUTS OF AMERICA	Employer identification number 36-2616917
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 4412 N. BRADY STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions DAVENPORT, IA 52806	

Check type of return to be filed(file a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

THOMAS P MCDERMOTT

- The books are in the care of ► **4412 N BRADY STREET, DAVENPORT, IA - 52806**
Telephone No. ► **(563) 388-7233** FAX No. ►
- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will cover.

►

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

► calendar year **2009** or

► tax year beginning , and ending

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$
		N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ►

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization ILLOWA COUNCIL, INC. BOY SCOUTS OF AMERICA	Employer identification number 36-2616917
	Number, street, and room or suite no. If a P.O. box, see instructions. 4412 N. BRADY STREET	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. DAVENPORT, IA 52806	

Check type of return to be filed (File a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

THOMAS P MCDERMOTT

- The books are in the care of ► **4412 N BRADY STREET, DAVENPORT, IA - 52806**

Telephone No. ► **(563) 388-7233**

FAX No. ► _____

- If the organization does not have an office or place of business in the United States, check this box ►

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2010**.

5 For calendar year **2009**, or other tax year beginning _____, and ending _____.

6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

7 State in detail why you need the extension _____

ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

8a \$ _____

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.

8b \$ _____

c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

8c \$ _____

N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ► _____

Title ► **CPA**

Date ► _____

Form 8868 (Rev 4-2009)

923832
05-26-09

- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box ►

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print	Name of Exempt Organization ILLOWA COUNCIL, INC. BOY SCOUTS OF AMERICA	Employer identification number 36-2616917
File by the extended due date for filing the return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 4412 N. BRADY STREET	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. DAVENPORT, IA 52806	

Check type of return to be filed (File a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

THOMAS P MCDERMOTT

- The books are in the care of ► 4412 N BRADY STREET, DAVENPORT, IA - 52806 Telephone No. ► (563) 388-7233 FAX No. ► _____

- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until NOVEMBER 15, 2010.
- 5 For calendar year 2009 , or other tax year beginning _____ , and ending _____ .
- 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$
		N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ► Frank Indegato Title ► CPA

Date ► 8-9-10

Form 8868 (Rev. 4-2009)